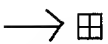


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Modified PTO/SB/05 (03-01)  
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<b>UTILITY PATENT APPLICATION TRANSMITTAL</b> <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>		<b>Attorney Docket No.</b> (DMSL)HA-86 (HAL-ID 167)	
		<b>First Inventor</b> John G. N. HENDERSON	
		<b>Title</b> STEERABLE ANTENNA AND RECEIVER INTERFACE FOR TERRESTRIAL BROADCAST	
		<b>Express Mail Label No.</b> EL872560275US	
<b>APPLICATION ELEMENTS</b> See MPEP chapter 600 concerning utility patent application contents.		<b>ADDRESS TO:</b> Assistant Commissioner for Patents Box Patent Application Washington, DC 20231	
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <small>(Submit an original and a duplicate for fee processing)</small>		7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)	
2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.		8. Nucleotide and/or Amino Acid Sequence Submission <small>(if applicable, all necessary)</small>	
3. <input checked="" type="checkbox"/> Specification [Total Pages 35] <small>(preferred arrangement set forth below)</small> <ul style="list-style-type: none"><li>- Descriptive title of the invention</li><li>- Cross Reference to Related Applications</li><li>- Statement Regarding Fed sponsored R &amp; D</li><li>- Reference to sequence listing, a table, or a computer program listing appendix</li><li>- Background of the Invention</li><li>- Brief Summary of the Invention</li><li>- Brief Description of the Drawings (if filed)</li><li>- Detailed Description</li><li>- Claim(s)</li><li>- Abstract of the Disclosure</li></ul>		a. <input type="checkbox"/> Computer Readable Form (CRF)	
		b. Specification Sequence Listing on: <ul style="list-style-type: none"><li><input type="checkbox"/> CD-ROM or CD-R (2 copies); or</li><li><input type="checkbox"/> paper</li></ul>	
		c. <input type="checkbox"/> Statements verifying identity of above copies	
4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 9]		<b>ACCOMPANYING APPLICATION PARTS</b>	
5. Oath or Declaration w/Power of Attorney [Total Pages 3] <ul style="list-style-type: none"><li>a. <input checked="" type="checkbox"/> Newly executed (original or copy)</li><li>b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63 (d)) <small>(for continuation/divisional with Box 18 completed)</small></li><li><input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> <small>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b)</small></li></ul>		9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))	
		10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of <small>(when there is an assignee)</small> Attorney	
		11. <input type="checkbox"/> English Translation Document (if applicable)	
		12. <input checked="" type="checkbox"/> Information Disclosure <input checked="" type="checkbox"/> Copies of IDS Statement (IDS)/PTO-1449 Citations	
		13. <input type="checkbox"/> Preliminary Amendment	
		14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <small>(Should be specifically itemized)</small>	
		15. <input type="checkbox"/> Certified Copy of Priority Document(s) <small>(if foreign priority is claimed)</small>	
		16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 <small>(b)(2)(B)(i) Applicant must attach form PTO/SB/35 or its equivalent.</small>	
6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76		17. <input type="checkbox"/> Other:	
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No.: Prior application information: Examiner: Group Art Unit: For CONTINUATION OR DIVISIONAL APPS only The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.			
<b>19. CORRESPONDENCE ADDRESS</b>			
<input type="checkbox"/> Customer Number or Bar Code Label		(Insert Customer No. or Attach bar code label here) 26479	
		or <input type="checkbox"/> Correspondence address below	
<b>Name</b>		Straub & Pokotylo	
<b>Address</b>		1 Bethany Road Suite 83, Bldg. 6	
<b>City</b>	Hazlet	<b>State</b>	N.J.
<b>Country</b>	USA	<b>Zip Code</b>	07730
<b>Telephone</b>	(732) 335-1222	<b>Fax</b>	(732) 335-1228
<b>Name (Print/Type)</b>		<b>Registration No. (Attorney/Agent)</b>	36,941
<b>Signature</b>		<b>Date</b>	November 30, 2001

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<h1>FEE TRANSMITTAL</h1> <h2>for FY 2001</h2> <p><i>Patent fees are subject to annual revision</i></p>		<b>Complete if Known</b>	
		Application Number	Not yet assigned
		Filing Date	Herewith
		First Named Inventor	John G. N. HENDERSON
		Examiner Name	Not yet assigned
		Group Art Unit	Not yet assigned
TOTAL AMOUNT OF PAYMENT		(\$ 1,838.00)	
		Attorney Docket No.	(DMSL)HA-86 (HAL-ID 167)

<b>METHOD OF PAYMENT</b>		<b>FEE CALCULATION (continued)</b>																																																																																																																													
1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to Deposit Account Number: 50-1049 Deposit Account Name: Straub & Pokotylo <input checked="" type="checkbox"/> Charge any deficiency or credit any overpayment <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		<b>3. ADDITIONAL FEES</b>																																																																																																																													
2. <input checked="" type="checkbox"/> Payment Enclosed: <input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other																																																																																																																															
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<b>SUBMITTED BY</b>		<b>Complete (if applicable)</b>	
Name (Print/Type)	Michael P. Straub	Registration No. (Attorney/Agent)	36,941
Signature	<i>Michael P. Straub</i>	Telephone	(732) 335-1222
		Date	November 30, 2001

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